

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Class:	235
Suggested Subclass:	375
Suggested Group Art Unit::	2876
Title::	DEPOSIT ACCEPTING METHOD AND APPARATUS FOR AUTOMATED BANKING MACHINE
Attorney Docket Number::	D-1130 R3 DIV
Request for Early Publication?::	No
Request for Non-Publication?::	Yes
Suggested Drawing Figure::	1
Total Drawing Sheets::	32
Small Entity::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

## **Applicant Information**

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Martin
Middle Name::	J.
Family Name::	Brown
Name Suffix::	
City of Residence::	Canton
State or Prov. Of Residence::	OH
Country of Residence::	US
Street of mailing address::	925 Field Street
City of mailing address::	Canton
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44718

## **Applicant Information**

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Craig
Middle Name::	A.
Family Name::	Montross
Name Suffix::	
City of Residence::	Hartville
State or Prov. Of Residence::	OH
Country of Residence::	US
Street of mailing address::	11733 William Penn Avenue
City of mailing address::	Hartville
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44632

## **Applicant Information**

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Todd
Middle Name::	
Family Name::	Galloway
Name Suffix::	
City of Residence::	North Canton
State or Prov. Of Residence::	OH
Country of Residence::	US
Street of mailing address::	5070 Quail Hill Street, NW, Apt. E
City of mailing address::	North Canton
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44720

## **Applicant Information**

Inventor Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert  
Middle Name:: W.  
Family Name:: Barnett  
Name Suffix::  
City of Residence:: Canton  
State or Prov. Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 5123 Seaview Circle, N.W.  
City of mailing address:: Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44708

## **Applicant Information**

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Mike
Middle Name::	
Family Name::	Ryan
Name Suffix::	
City of Residence::	Canton
State or Prov. Of Residence::	OH
Country of Residence::	US
Street of mailing address::	1403 44th Street, N.E.
City of mailing address::	Canton
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44708

## **Applicant Information**

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	James
Middle Name::	R.
Family Name::	Kay
Name Suffix::	
City of Residence::	Uniontown
State or Prov. Of Residence::	OH
Country of Residence::	US
Street of mailing address::	1441 Tumbleweed Street, N.E.
City of mailing address::	Uniontown
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44685

## **Applicant Information**

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Mark
Middle Name::	A.
Family Name::	Ward
Name Suffix::	
City of Residence::	North Royalton
State or Prov. Of Residence::	OH
Country of Residence::	US
Street of mailing address::	9510 Cove Drive, #C12
City of mailing address::	North Royalton
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44133



## **Applicant Information**

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	David
Middle Name::	A.
Family Name::	Peters
Name Suffix::	
City of Residence::	Tallmadge
State or Prov. Of Residence::	OH
Country of Residence::	US
Street of mailing address::	494 Brian Drive
City of mailing address::	Tallmadge
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44278

## **Applicant Information**

Inventor Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Alan  
Middle Name::  
Family Name:: Day  
Name Suffix::  
City of Residence:: Cambridge  
State or Prov. Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 647 Highland Avenue  
City of mailing address:: Cambridge  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 43725

**Correspondence Information**

Correspondence Customer Number:: 28995

**Representative Information**

Representative Customer Number::	28995
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date:
This Application	Divisional	09/723,304	11/27/2000
09/723,304	§ 119(e) Priority of	60/167,996	11/30/1999

**Assignee Information**

Assignee Name:: Diebold, Incorporated  
City of mailing address:: North Canton  
State or Province of mailing address:: OH